

Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



Statement of Committee Organization

1.	Statement Information		
	Date: 3/21/2019		5.6
	Type: New Amended (if amending, enter MEC ID C16	\$ section cl	5, 6 hanged)
2.	ommittee Information		
	Friends of Dan Guenther me of Committee		
	2316 Cherokee Suite A, St. Louis MO 631	18	(314) 304-6797
	Committee Mailing Addrace City State 8.7in	St. Louis Board of F	Telephone Number Election Commissioners
	Official Committee Email Address	County Clerk or Board of Election Commiss	
	Committee Type: Campaign Candidate Continuing	(PAC) Debt Service Exp	ploratory Political Party
3.	Treasurer/Deputy Treasurer Information		
	Sara Johnson Treasurer's Name (First & Last)	-	
	3343 Texas, St. Louis MO 63118	Treasurer's Email Address (optional)	/
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
	Megan Bennett Deputy Treasurer's Name (if one appointed)	5	
	1600 Locust Apt 504, St. Louis MO 63103	Deputy Treasurer's Email Address (optional 403-5756	1) / \
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	r Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information		
		1	
	Additional Committee Officers Name & Title (if any)	Additional Committee Officer's Mailing Ad	dress, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address	. City. State. & Zip
	CANDIDATES: Do you have more than one candidate committee	-	
5.	Official Bank Account Information (required by all committees		Dack) Lumin NO
			A Company of the Comp
6.	Candidate Supported or Opposed (candidate committees must	t include self, if candidate)	
	Dan Guenther, 3011 Indiana Avenue, St Louis MO 63118	(314 ₎ 304-6797	()
_	Name & Mailing Address, City, State & Zip of Candidate 3/2/2021 Alderman, City of St. Louis 9th Ward	Telephone Number (Candidate Committee	Support
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees	must complete this section)	
	Name of Bailot Measure	Election Date & Political Subdivision	Support or Oppose
8. Signature(s) Check certification(s) & sign (required by all committees) I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and acc further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch.			
			•
			mispable unique Cii. 5/5 KSWO.
	ZHUWD II I VVII ///	Candidate (Candidate Committees Only)	